



City of Atlanta

Check One

- ☐ Atlanta Bd. of Education
☐ Firefighters
☐ General Employees
☐ Police Officers

**Defined Benefit Pension Funds
Change of Address Form
(Must be Notarized)**

Return Form to:
City of Atlanta
Department of Finance – Pension Office
55 Trinity Avenue, S. 1600
Atlanta, Georgia 30303-3534
404.330.6260

Section 1 – Participant Information (please print)

Last Name: _____ First Name: _____ Middle Initial: _____

Social Security: _____

Section 2 – Old Address

_____/_____/_____
Street City State Zip Code

Section 3 – New Address

_____/_____/_____
Street City State Zip Code

Section 4 – Required Signature

Signature _____

Date _____

Important Note

***If you would like your pension check to be prepared for direct deposit, please request a
Pension Direct Deposit Authorization Form from the Pension Office.***

Section 5 – Notary Documentation

Notary Signature: _____

Date: _____

Notary Stamp/Seal: